

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: FRANCIS HOUSE (310629)

Address: 3601 S CHICAGO AVE, SOUTH MILWAUKEE, WI 53172

License Status: REGULAR

Licensed/Certified/Registered 09/01/1997

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096505 **End Date:** 02/01/2006 **Type:** OTHER **Purpose:** SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009136 Served 03/20/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
13.05(3)(a)	ENTITY ALLEGATION REPORTING REQUIREMENTS		
83.21(4)(m)	ABUSE, NEGLECT, OR MISAPPROPRIATION		
83.32(2)(d)	REVIEW OF PROGRESS		
83.33(4)	CLIENT GROUP SPECIFIC SERVICES		

Survey ID: 0092711 **End Date:** 05/18/2004 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008995 Served 06/12/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(3)(j)1	DESTRUCTION OF MEDICATIONS	10/26/2005	Yes

Survey ID: 0091776 **End Date:** 01/05/2004 **Type:** OTHER **Purpose:** COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 03/13/2006 **SOD #**10009136 **Appealed:** No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

FORFEITURE---83.21(4)(m)

FORFEITURE---83.33(2)(d)

FORFEITURE---83.33(4)

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Complaint History

Date Complaint Received: 03/29/2004

Date Investigation Completed: 05/18/2004

Subject Area(s)

RESIDENT RIGHTS
MEDICATIONS

Result

NOT SUBSTANTIATED
SUBSTANTIATED

SOD #

10008995

Date Complaint Received: 01/28/2004

Date Investigation Completed: 05/18/2004

Subject Area(s)

PROGRAM SERVICES

Result

NOT SUBSTANTIATED

SOD #

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